

## STATE OF UTAH APPLICATION FOR FIRE SPRINKLER SYSTEM INSPECTION & TESTING CERTIFICATE OF REGISTRATION

Type of		_						S	No.		
Application	☐ New	☐ Renewal	Original D	ate:				/E-	r office was sub-	)	
Please Print or T	vpe							(FC	or office use only	<u>y)</u>	
Applicant Informa											
Applicant Name											
-	F	irst		Middle					Last		
Social Security Nun	nber				Teleph	none					
Home Address											
-	Number a	nd Street or PO B	OX		Cit	y			State	Z	Zip Code
<b>Employment Infor</b>	mation										
Name of Firm _											
Address of Firm:	Number	and Street or PO	Box		Cit	v			State	7	Zip Code
Applicant Descript		and street of 1 o	BOX		Cit	<i>y</i>			State		пр соце
Date of Birth		Ag	e	ears	Sex		F $\Box$	M	Weight		lbs
Heightft	in	Hair Color				Eye C	olor				
Have you ever been	•	•		l No		1.41	. 1:	•,•	1 .		c .:
If "yes", indicate the (Use back side of ap		location of the off	ense, the arre	esting agen	icy, and	the co	urt disj	position	and sentenc	ıng ın	formation
READ THE FOLL	OWING PARA										
I affirm that this applicand belief. I also under											
Utah with regard to In	spection and Testi	ng of Water Based	Fire Protection								
of registration and/or t	he possibility of c	riminal prosecution	•								
Signature						Date					
<b>Technician Level A</b>	pplying For										
☐ Technician Lev	el – I	Technician Lev	el –II		Technic	cian Le	vel – I	II	☐ Master	Tech	nician
S Certification of Re	egistration	\$30.00									
Examination Fee		\$20.00									
Total \$											
MAIL TO: UTA	H TATE FIRE	MARHSAL, 527	2 SOUTH (	COLLEGI	E DRIV	E, SU	ITE 30	02, MU	RRAY, UTA	AH 84	1123-2611
Original	Renewal		Renewal		Re	newal			Renewa	1	

Original Date	Renewal Date	Renewal Date	Renewal Date	Renewal Date
Amount Paid	Amount Paid	Amount Paid	Amount Paid	Amount Paid
Receipt #	Receipt #	Receipt #	Receipt #	Receipt #
Date Crt	Date Crt	Date Crt	Date Crt	Date Crt
Sent	Sent	Sent	Sent	Sent